

IN PATIENT SUMMARY BILL

UHID : MMH202481620

IP No : IP2024002079

Patient name : Mr.SURULIRAJAN.C

Age : 49 Y 1 M 17 D/Male

Consultant Name : Dr.T.PALANIAPPAN

Bill No : MMH/MH/IP202402026

Bill Date : 21/09/2024

DOA : 19/9/2024 12:25AM

DOD :

Entity Type : CASH

Entity Name : CASH

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 11,550.00
3	BLOOD COMPONENTS	₹ 1,550.00
4	DIET CHARGES	₹ 1,500.00
5	DUTY MEDICAL OFFICER CHARGE	₹ 2,250.00
6	LABORATORY	₹ 53,827.00
7	NURSING CHARGE	₹ 2,400.00
8	PROFESSIONAL TEAM FEES	₹ 15,000.00
9	RADIOLOGY	₹ 7,800.00
Gross Amount		₹ 96,227.00
Net Payable		₹ 96,227.00
Advance Amount		₹ 10,000.00
Received Amount		₹ 86,227.00

Received Amount in Words : Ninety-Six Thousand Two Hundred Twenty-Seven Only

SUDHA
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	9/19/2024	MMH/MH/RECH202403646	UPI	Advance Amount	10,000.00
2	9/21/2024	MMH/MH/REDH202420826	UPI	Collected Amount	86,227.00